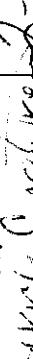


SENDER: COMPETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

Article Advanced to

David Billups, #211-903
Ross Correctional Institute
PO Box 7010
Chillicothe, OH 45601

SENDER: COMPLETE THIS SECTION			
COMPLETE THIS SECTION ON DELIVERY			
<p>A. Signature  </p> <p>B. Received by (Printed Name) </p> <p>C. Date of Delivery </p> <p>D. Is delivery address different from item 1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If YES, enter delivery address below:</p>			
<p>3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>			
<p>1. Article Addressed to:</p> <p>David Billups, #211-903 Ross Correctional Institution PO Box 7010 Chillicothe, OH 45601</p> <p>2. Article Number  (Transfer from service label)</p>			
<p>PS Form 3811 August 2001 01-377    Domestic Return Receipt</p>			